								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2001								000153					
CLAIMS AS FILED - PART I (Column 1)						(Column 2)			SMALL ENTITY			OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS			17						ATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BAS	C FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			∫ 🗗 minus 20=		* Ø		X	9=		OR	X\$18=		
INDEPENDENT CLAIMS			3 minus 3 = *				X	X42=		OR	X84=		
MU	ILTIPLE DEPEN	NDENT CLAIM P	RESENT					+1	40=		OR	+280=	
* If	the difference	in column 1 is	ess than zero, enter "0" in column 2				TO	TAL		OR	TOTAL	740	
	CLAIMS AS AMENDED - PART II										4	OTHER	
		(Column 1)		(Colur		(Colu	mn 3)	SM	ALL	ENTITY	OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRES		RA	ATE.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N N	Total	*	Minus	**		=		X\$	9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X4	12=		OR	X84=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM				40			.000	
									40= OTAL		OR	+280= TOTAL	·
			(0.1) (0.1				ADDIT			OR	ADDIT. FEE		
	(Column 1) (Column 1) HIGHE					(Column 3	mn 3)			ADDI	1		
NDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRES EXT		RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$	9=		OR	X\$18=	
AMEND	Independent	*	Minus	***]=		X4	2=		OR	X84=	
ال	PIRST PRESE	NTATION OF MU	ILTIPLE DEF	LNDENT	CLAIM	L		+14	10=		OR	+280=	
									OTAL FEE		OR	TOTAL ADDIT. FEE	
	(Column 1) (Column 2) (Column 3)											ADDII. FEE	<u></u>
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	EST BER DUSLY	PRES EXT	ENT	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
WQ.	Total	*	Minus	**		= -		X\$	9=		OR	X\$18=	1 5-1
ME	Independent	*	Minus	***		=		X4				X84=	
lacksquare	FIRST PRESENTATION OF MI		JLTIPLE DEPENDENT		CLAIM	LAIM			2=		OR	∧84= ————————————————————————————————————	
+140= OR											OR	+280=	
A*A	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
""	ii the Highest Nu The "Highest Num	imber Previously Pa inber Previously Pai	d For" (Total o	o opace i r Independe	is iess tha ent) is the	n ਤ, ente highest	er "3." number			propriate box			